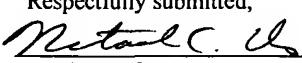


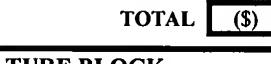
<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.	INL-059
		First Named Inventor	Shin
		Title	AQUEOUS SOLUTIONS FOR REDUCING THE RATE OF OXYGEN LOSS, AND METHODS THEREOF
<b>APPLICATION ELEMENTS</b>		<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input type="checkbox"/> Small Entity Status <input type="checkbox"/> Applicant claims small entity status <input type="checkbox"/> Status established in prior application and is still proper and desired		<b>ACCOMPANYING APPLICATION PARTS</b>	
3. <input checked="" type="checkbox"/> Specification and Drawings [Total Pages 29] - Written Description - (21 pages) - Claims - (5 pages) - Abstract - (1 page) - Sheets of Drawings - (2 sheets) <input type="checkbox"/> Formal <input checked="" type="checkbox"/> Informal		8. <input type="checkbox"/> 37 CFR 3.73(b) Statement ( <i>when there is an assignee</i> ) <input type="checkbox"/> Power of Attorney 9. <input type="checkbox"/> English Translation Document ( <i>if applicable</i> ) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
4. <input type="checkbox"/> Oath or Declaration [Total Pages ] a. <input type="checkbox"/> Newly executed (original) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)  <i>[Note Box 5 below]</i></small>		11. <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Drawings [Total Sheets ]	
		12. <input checked="" type="checkbox"/> Return Receipt Postcard ( <i>specifically itemized</i> )	
5. <input type="checkbox"/> Incorporation by Reference (usable if Box 4b is checked) The entire Disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		13. <input type="checkbox"/> Certified Copy of Priority Document(s) ( <i>if foreign priority claimed</i> ) 14. <input type="checkbox"/> Nonpublication Request Under 35 U.S.C. 122(b)	
6. <input checked="" type="checkbox"/> Application Data Sheet 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <input type="checkbox"/> Computer Readable Form (CRF) <input type="checkbox"/> Paper Copy (identical to computer copy) <input type="checkbox"/> CD (2 copies) (identical to computer copy) <input type="checkbox"/> Statement verifying identity of above copies		15. <input type="checkbox"/> CD in duplicate for large table or computer program 16. <input type="checkbox"/> Other:	
17. <input type="checkbox"/> If a CONTINUING APPLICATION: Amend the specification by inserting on page 1, before the first line, the sentence: This is a <input type="checkbox"/> continuation <input type="checkbox"/> divisional <input type="checkbox"/> continuation-in-part of prior application Serial No. _____, filed on _____, the entire disclosure of which is incorporated by reference herein. -- <b>Priority to the above application(s) is claimed under 35 U.S.C. 120.</b> Prior application information: Examiner: _____ Group/Art Unit: _____			
18. <input checked="" type="checkbox"/> Priority - 35 U.S.C. 119 <input checked="" type="checkbox"/> Priority of application Serial No. 60/398,661 filed on July 26, 2002 in the U.S. Patent Office is claimed under 35 U.S.C. 119. <input type="checkbox"/> The certified copy has been filed in prior U.S. application Serial No. _____/_____ on _____. <input type="checkbox"/> The certified copy will follow.			
<b>CORRESPONDENCE ADDRESS</b>		<b>SIGNATURE BLOCK</b>	
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100 Customer No. 021323		Respectfully submitted,  Natasha C. Us Attorney for the Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110	

10/62598  
07/24/03



**FEE TRANSMITTAL  
FY 2003**

<i>Complete if Known</i>	
Application Serial Number	Not yet assigned
Filing Date	Herewith
First Named Inventor	Shin
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket No.	INL-059

METHOD OF PAYMENT					FEE CALCULATION (continued)						
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other					3. ADDITIONAL FEES						
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.					Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description		Fee Paid		
3. <input type="checkbox"/> Applicant claims small entity status.					130	65	Surcharge - late filing fee or oath				
					50	25	Surcharge - late provisional filing fee or cover sheet				
					130	130	Non-English specification				
					2,520	2,520	Request for ex parte reexamination				
					110	55	Extension for reply within first month				
					410	205	Extension for reply within second month				
					930	465	Extension for reply within third month				
					1450	725	Extension for reply within fourth month				
					1970	985	Extension for reply within fifth month				
					320	160	Notice of Appeal				
					320	160	Filing a brief in support of an appeal				
					280	140	Request for oral hearing				
					130	130	Petitions to the Commissioner				
					180	180	Submission of Information Disclosure Statement				
					750	375	Filing a submission after final rejection (37 CFR 1.129(a))				
					750	375	For each additional invention to be examined (37 CFR 1.129(b))				
					100	100	Certificate of Correction for applicant's error				
					110	55	Submission of Terminal Disclaimer				
					Other fee (Specify) Other fee (Specify)						
<b>1. FILING FEE</b>					<b>FEE CALCULATION</b>						
<b>Large Entity</b>											
<b>Fee (\$)</b>		<b>Fee Description</b>			<b>Fee Paid</b>						
750		Utility filing fee			750.00						
330		Design filing fee									
160		Provisional filing fee									
					Number Filed	Number Extra	Rate	Amount			
Total Claims					55	- 20 = 35	x \$ 18.00 =	630.00			
Independent Claims					3	- 3 = 0	x \$ 84.00 =	0.00			
<input type="checkbox"/> Multiple Dependent Claim(s), if any					\$280.00 =						
					TOTAL: 1,380.00						
<b>SMALL ENTITY DISCOUNT:</b>											
<b>SUBTOTAL (1)</b>					<b>(\$)</b> 1,380.00						
<b>2. AMENDMENT CLAIM FEES</b>											
Claims Remaining After Amend.		Highest No. Previously Paid For	Present Extra	Rate	Fee Paid		<b>SUBTOTAL (3)</b>			<b>(\$)</b> 0.00	
Total Indep.				x \$ 18.00 =							
				x \$ 84.00 =							
<input type="checkbox"/> First Presentation of Multiple Dep. Claim				+ \$280.00 =							
TOTAL: <b>SMALL ENTITY DISCOUNT:</b> <b>SUBTOTAL (2)</b>					<b>(\$)</b> <b>(\$)</b> <b>(\$)</b> 0.00					<b>SUBTOTAL (1)</b>	<b>(\$)</b> 1,380.00
										<b>SUBTOTAL (2)</b>	<b>(\$)</b> 0.00
										<b>SUBTOTAL (3)</b>	<b>(\$)</b> 0.00
										<b>TOTAL</b>	<b>(\$)</b> 1,380.00
<b>CORRESPONDENCE ADDRESS</b>					<b>SIGNATURE BLOCK</b>						
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100					Respectfully submitted,  Natasha C. Us Attorney for the Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110						